

Parcel # _____

Permit # _____

Residential HVAC Permit-Town of Winneconne

Owners name _____ Phone _____

Project address _____

Contractors name _____ Phone _____

Contractors address _____ Fax #: _____

Type of occupancy _____

Job description _____

<u>Items</u>	<u>Count</u>	<u>Fees</u>
Base fee includes one furnace or A/Cunit		\$35.00
Duct work Alteration		\$25.00
Additional furnace or A/C units-\$25.00 each	_____	\$ _____
Project Total Cost \$ _____	Total Fees (\$40.00 minimum)	\$ _____

Owner/Contractor _____ Date _____

Inspector _____ Date _____

Payable to: Town of Winneconne, 6494 County Road M, Winneconne WI 54986. PH: 582-3260 Fax: 582-3207

Inspector: Tom Spierowski, 6460 Paynes Point Rd., Neenah, WI 54956 PH: 920-428-3361 or 920-729-4947

- All work to meet the State Codes or reinspection fees will be charged for improper installations.
- The owner/contractor is responsible for making arrangements for the final inspection.